POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Bm		04-05-01
O.I.P.E. CLASSIFIER	RSD		10/11/0.
FORMALITY REVIEW	MD	579	10/26/01
RESPONSE FORMALITY REVIEW	m	905	4/18/02

INDEX OF CLAIMS

✓ .... Rejected	N .... Non-elected
= .... Allowed	I .... Interference
– (Through numeral)... Canceled	A .... Appeal
÷ .... Restricted	O .... Objected

Claim				Date								
Final	Original											

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)